

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	6/14/01
FORMALITY REVIEW	B7	3C3-883	07-18-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1091	10-26-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
1	7/13/01
2	8/07/01
3	8/20/01
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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5227  
10/26/01